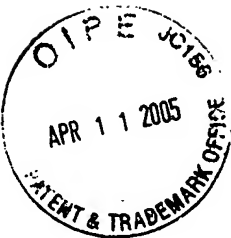


SFW

KONG-24



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Ling Y. Cheung
Application No. : 10/717,135 Confirmation No. : 7256
Filed : November 18, 2003
For : METHODS AND COMPOSITIONS FOR TREATING
RENAL FAILURE
Examiner : Randall O. Winston
Group Art Unit : 1654

New York, New York
April 7, 2005

Mail Stop Amendment
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Certificate of Mailing under 37 CFR 1.8

Date of Deposit: April 7, 2005

I hereby certify that this paper/fee is being deposited with the United States Postal Service as First Class Mail on the date indicated above and is addressed to Mail Stop Amendment, Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Diane Keselman

1. Supplemental Information Disclosure Statement (in duplicate);
2. Form PTO/SB/08A (in duplicate);
3. Copy of the cited foreign patent document; and
4. Postcard.



KONG-24

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Ling Y. Cheung
Application No. : 10/717,135 Confirmation No. : 7256
Filed : November 18, 2003
For : METHODS AND COMPOSITIONS FOR TREATING
RENAL FAILURE
Examiner : Randall O. Winston
Group Art Unit : 1654

New York, New York
April 7, 2005

Mail Stop Amendment
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

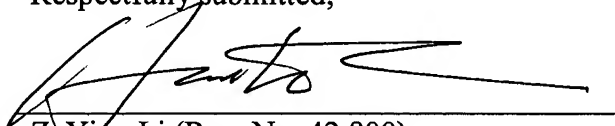
Pursuant to 37 C.F.R. §§ 1.56 and 1.97(b)(4), applicant hereby makes of record the document listed in the accompanying Form PTO/SB/08A. A copy of the listed document is enclosed.

Applicant requests that the cited document be (1) fully considered by the Examiner during the course of examination of this application, and (2) printed on any patent issuing from this application. Applicant further requests that a copy of the Form PTO/SB/08A, as considered and initialed by the Examiner, be returned to the undersigned with the next communication.

This Statement is filed before the mailing of a first Office Action after the filing of a Request for Continued Examination under 37 C.F.R. § 1.114. Pursuant to 37 C.F.R. §1.97(b)(4), submission of this Statement requires no fee.

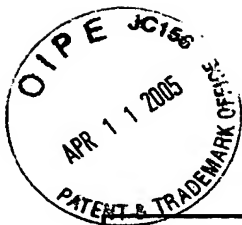
The Director is hereby authorized to charge payment of any additional fees required in connection with this Statement, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this letter is transmitted herewith.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Z. Ying Li', is written over a horizontal line.

Z. Ying Li (Reg. No. 42,800)
Attorney for Applicant
Haitao Sun (Reg. No. 48,546)
Agent for Applicant

Fish & Neave IP Group
Ropes & Gray LLP
Customer No. 1473
1251 Avenue of the Americas
New York, New York 10020-1104
Tel.: (212) 596-9000



PTO/SB/08a/b (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/B/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Application Number	10/717,135
				Filing Date	November 18, 2003
				First Named Inventor	Ling Y. Cheung
				Art Unit	1654
				Examiner Name	Randall O. Winston
Sheet	1	of	1	Attorney Docket Number	KONG-24

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		CN1309175 (in Chinese with English Abstract)	08-22-2001	Chen		

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

Examiner Signature		Date Considered	
--------------------	--	-----------------	--

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional). 2 See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. 6 Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.